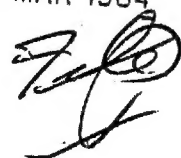


MEMORANDUM FOR  
ATTENTION : Chief/DDR  
FROM : Contracting Officer  
SUBJECT : Renewal of Service Contracts - FY 1965

17 MAR 1964



1. In order that Service Contracts, exclusive of leases and utilities, for the coming Fiscal Year can be in effect by 1 July 1964, please submit a copy of the memorandum on the reverse of this letter indicating requests for the same by 1 April 1964, or earlier, if possible.

2. In submitting a copy of this letter as a request for renewal of existing contracts or award of new contracts for services, please list serial numbers, types, locations, or other pertinent information to assist in preparing the Contract. Your requests should also state any changes or additions in the services which you may desire, as well as comments on Contractor's past performance, if unsatisfactory.

3. As soon as Fiscal Year 1965 funds become available to your activity, it is requested that a requisition (using the identical voucher number as the order/contract number indicated on the reverse of this letter) citing the appropriate allotment account number chargeable for the services, be submitted to confirm the memorandum request previously submitted.

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4. If there are any questions concerning these renewals, please contact [redacted] on Extension 2383. All request memorandums, requisitions and pertinent papers should be routed to OL/PD/ICS, 1807 Quarters Eye.

25X1A9a



Contracting Officer

Distribution:

Orig. and 1 - Addressee  
2 - Pending

OL/PD/ICS/[redacted]:ch/2383

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XERO  
COPY

MEMORANDUM FOR: Contracting Officer, OL/PD/ICS

ATTENTION : [REDACTED] 1807 Quarters Eye

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Please take action as indicated:

(Check One)

| <u>Order/<br/>Contract No.</u> | <u>Description/Contractor</u> | <u>Renew</u> | <u>Do Not<br/>Renew</u> | <u>Est. Cost<br/>FY 65</u> |
|--------------------------------|-------------------------------|--------------|-------------------------|----------------------------|
|--------------------------------|-------------------------------|--------------|-------------------------|----------------------------|

Date \_\_\_\_\_

Requested By \_\_\_\_\_  
(Name of Contact Officer)

Office/Division \_\_\_\_\_

Telephone No. \_\_\_\_\_

XERO  
COPY